

LFIR # 1675

1. Project Title	Jacksonville Fire and Rescue Department Health and Wellness Center						
2. Senate Sponsor	Aaron Bean						
3. Date of Request	12/04/2021						
4. Project/Program De	escription						
major health service JFRD Health and W	s: medical, fitness, ellness Program. C	injury/rehabilitátio urrently, the opera	ealth and Wellness Cer n, and mental health. T ations of the program ar llow JFRD to outfit a ne	hese services are col e limited by the physi	lectively known as the cal constraints of the		
5. State Agency to re-	ceive requested fu	inds Departr	ment of Financial Service	ces			
State Agency conta	acted? No						
6. Amount of the Non	recurring Request	for Fiscal Year 2	022-2023				
Type of Funding			Amo	unt			
Operations				0			
Fixed Capital Outlay	1			2,500,000			
Total State Funds I	Requested		2,500,000				
7. Total Project Cost f	or Fiscal Year 202	2-2023 (including	g matching funds avai	lable for this project	t)		
Type of Funding			Amount	Percentage			
	Total State Funds Requested (from question #6)			50%			
Matching Funds							
Federal			0	0%			
State (excluding the	amount of this requ	uest)	0	0%			
Local			2,500,000	50%			
Other			0	0%			
Total Project Costs	s for Fiscal Year 20	022-2023	5,000,000	100%			
8. Has this project pro	eviously received	state funding?	No				
Fiscal Year	Amo	ount	Specific	Vetoed			
(уууу-уу)	Recurring	Nonrecurring	Appropriation #				
9. Is future funding lil	kely to be request	ed?	No				
a. If yes, indicate n	onrecurring amou	int per vear.					
• .	•		lieu of etate funding				
b. Describe the sol	urce of funding the	at can be used in	lieu of state funding.				
10. Has the entity req	uesting this proje	ct received any fe	ederal assistance rela	ted to the COVID-19	pandemic?		
Yes							



LFIR # 1675

If yes, indicate the amount of funds received and what the funds were used for.

The City of Jacksonville has received \$178,442,663.00 in CARES Act funding and \$171,897,895.00 in American Rescue Plan (ARP) funding. CARES and ARP funds have been used to provide COVID-19 testing and financial relief to citizens and businesses.

11. Details on how the requested state funds will be expended

Spending Category	Description	Amount		
Administrative Costs:				
Executive Director/Project Head Salary and Benefits		0		
Other Salary and Benefits		0		
Expense/Equipment/Travel/Supplies/Other		0		
Consultants/Contracted Services/Study		0		
Operational Costs: Other				
Salary and Benefits		0		
Expense/Equipment/Travel/Supplies/Other		0		
Consultants/Contracted Services/Study		0		
Fixed Capital Construction/Majo	r Renovation:			
Construction/Renovation/Land/ Planning Engineering	Funds will be used to renovate, outfit and furnish the facility. This will consist of exam rooms, offices, testing space, and a physical therapy area. One of the most significant components will be outfitting the facility to provide radiology services including ultrasound, chest x-ray, and low-dose lung CT scan.	2,500,000		
Total State Funds Requested (must equal total from question #6)				

12. Program Performance

a. What specific purpose or goal will be achieved by the funds requested?

To perform at a high level on the job, uniformed personnel must balance the emotional, physical, and mental stresses of work and personal life and be able to cope effectively. Improving the mental health and wellness of uniformed personnel is imperative to ensure they can perform essential job functions. By co-locating the services of the JFRD Health and Wellness Program, we will be able to minimize the occupational health and safety risks of firefighters while simultaneously improving job performance. To maximize the potential of the JFRD Health and Wellness Program, a centrally located stand alone facility is required.

b. What activities and services will be provided to meet the intended purpose of these funds?

Funds will be used to renovate, outfit and furnish the facility. This will consist of exam rooms, offices, testing space, and a physical therapy area. One of the most significant components will be outfitting the facility to provide radiology services including ultrasound, chest x-ray, and low-dose lung CT scan.

c. What direct services will be provided to citizens by the appropriation project?

Direct services provided to JFRD employees will include spirometry (breathing) testing, biometric screening, vaccinations, blood work, audiometer testing, vision screening, exercise stress test, chest x-ray, low-dose lung CT scan, rehabilitation, and mental health services.

d. Who is the target population served by this project? How many individuals are expected to be served?

The target population is Jacksonville Fire and Rescue Department first responders. JFRD has approximately 1,600 personnel.

e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will



LFIR # 1675

be measured?

The expected outcome of this project is improved health and wellness of uniformed personnel to ensure they can perform essential job functions. This will be measured by annual monitoring screening of personnel. A rehabilitation process will also be put in place to ensure injured personnel are conditioned and able to return to full duty.

f. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for the contract?

Termination of funding.		

13. The owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.

Local Government (City of Jacksonville)



LFIR # 1675

14.	. Requestor Contact	Informat	ion				
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	b. Organization	City of Jacksonville					
	c. E-mail Address	rachelz@coj.net					
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15.	15. Recipient Contact Information						
	a. Organization	City of Jacksonville					
	b. Municipality and County Duval						
	c. Organization Type						
	□For Profit Entity	у					
	□Non Profit 501(c	c)(3)					
	□Non Profit 501(c	(c)(4)					
	☑Local Entity	у					
	□University or College						
	□Other (please sp	pecify)					
	d. First Name	Rachel		Last Name	Zimmer		
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16.	16. Lobbyist Contact Information						
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